



FRANCIS CITY
 2317 South Spring Hollow Road
 Francis, Utah 84036
 (435) 783-6236 FAX (435) 783-6186
 E-Mail: mandy.c@francisutah.org

BUSINESS LICENSE RENEWAL

Section I: Business Information

Is this application a: New Application Renewal Change of ownership or location

Name of Applicant _____ Date _____

Business Name _____ Is this name registered with the State of Utah Yes No

Type of Business (be specific) _____

Physical Address _____

Mailing Address (if different) _____

Phone Number _____ Email: _____

Federal ID: SSN or EIN _____

Sales & Use Tax No. (If not applicable, please sign here) _____

Professional License/State Contractors Number (if applicable) _____

Section II: Check all that apply

- Approximate number of employees _____
- | | | |
|--|---|---|
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Home Occupation | <input type="checkbox"/> Sole Proprietorship |
| <input type="checkbox"/> General Partnership | <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Limited Liability Co. |
| <input type="checkbox"/> Profit Corporation | <input type="checkbox"/> Non-Profit Corporation | <input type="checkbox"/> Sexually Oriented Business |

**Any Business with clients/customers coming to the premises requires a building and fire inspection.
 (Attach inspection report with application.)**

Section III: Describe Business

Where will your equipment, tools, supplies to conduct your business be stored? _____

If storage is located at home what will be stored and where? _____

Section IV: Verification of Accuracy – Acknowledgment of Responsibility

Under penalty of perjury, I hereby certify that the information provided for this entire application is complete, accurate and in accordance with Francis City Ordinances. I further certify that updated information will be provided in writing, as required, to Francis City within ten (10) days of any change to the business, name, organization, or location. I hereby acknowledge that illegal or fraudulent business practices are grounds for revocation of the business license, as is delinquent payment of the business license fee. This form is an application for a business license. The receipt for payment of license fees thereof does not constitute being approved to operate a business; the actual license will be issued only when approval is given. It is the responsibility of the licensee to be familiar with the ordinance(s) under which the license is applied for. All business licenses are to be renewed yearly. The application and fees provided herein shall be due and payable by the 31st of January of each year, or before commencing a new business, trade, service or profession. All license fees not paid by then shall be considered delinquent and assessed a \$25.00 late penalty. Failure to renew by the last day of February of each year shall result in revocation of the business license. Responsibility of renewal is that of the licensee. Failure to receive a renewal notice does not excuse this responsibility.

Signature of Authorized Business Agent/Owner

Date

FOR OFFICE USE ONLY:

PLANNING:

Meets City Code: Yes No If no, give reasoning: _____

Meets Zoning Requirements: Yes No If no, give reasoning: _____

Conditional Use Permit Required: Yes No If yes,
 Planning Commission Approval Date: _____
 City Council Approval Date: _____
 Date Inspected: _____
 Reinspection Date: _____

City Planner Signature: _____

BUSINESS LICENSE OFFICIAL:

Inspection required: Yes No If yes, date inspected _____

License Fee _____ Date Paid _____ Rec'd by _____ Receipt # _____

Business License Administrator Approval Signature:

Date _____